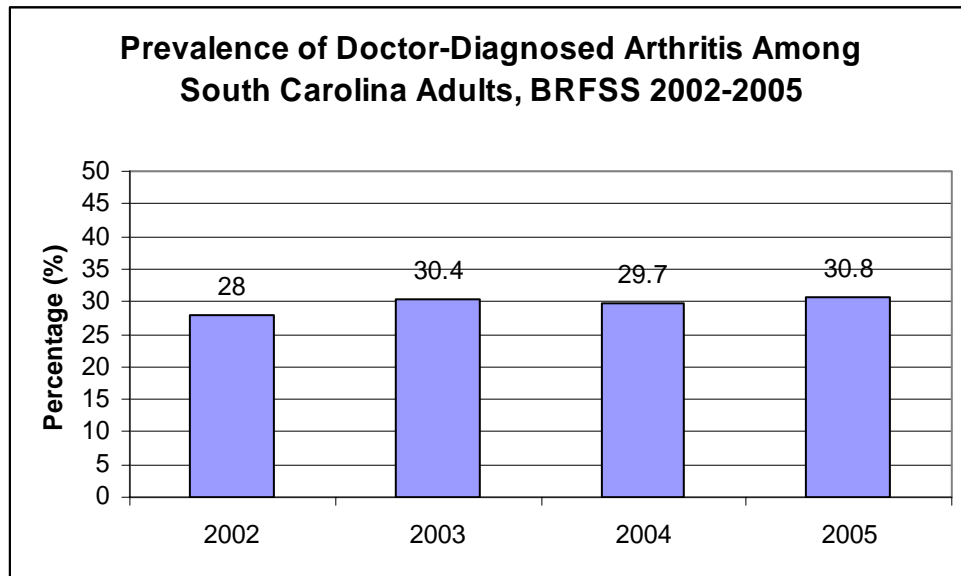


Update to the Arthritis Burden Report, 2005

Among South Carolina adults in 2005, the prevalence of doctor-diagnosed was 30.8%. An additional 14.4% of South Carolina adults reported that they have chronic joint pain but had not been diagnosed with arthritis by a health care professional (possible arthritis). For the past four years, the prevalence of doctor-diagnosed arthritis has remained stable at approximately one third of the adult South Carolina population over the age of 18.



Therefore, approximately 43.2% of the adult population of South Carolina is affected by chronic joint symptoms in 2005.

The prevalence of arthritis decreased with increasing education level, effected all races and ethnicities, was higher among women, increased with increasing age and decreased between the lowest and highest income groups. Activity limitation in daily activity among people with doctor-diagnosed arthritis decreased between the lowest and highest income groups. There was a significant difference in the percentage of people with activity limitation attributable to arthritis among those with less than a high school education (57.0%) than those with some college (38.8%). Activity limitation affects all races, both genders and all ages with an overall state wide average of 44.6% of doctor-diagnosed arthritis patients.

Prevalence of Doctor-Diagnosed Arthritis and Activity Limitation Attributable to Arthritis Among People with Doctor-Diagnosed Arthritis Among Adults in South Carolina, BRFSS 2005.

| Variable | Doctor-Diagnosed Arthritis | | | Activity Limitation Attributable to Arthritis Among People with Doctor-Diagnosed Arthritis | | |
|---------------------|----------------------------|----------|----------|--|----------|----------|
| | Mean | Lower CI | Upper CI | Mean | Lower CI | Upper CI |
| Total | 30.8 | 29.7 | 32.0 | 44.6 | 41.0 | 48.1 |
| Males | 27.1 | 25.4 | 28.9 | 39.5 | 33.8 | 45.2 |
| Females | 34.2 | 32.7 | 35.7 | 48.6 | 44.2 | 52.9 |
| White | 31.3 | 30.0 | 32.6 | 42.3 | 38.1 | 46.5 |
| Black | 27.9 | 25.4 | 30.3 | 46.0 | 39.0 | 52.9 |
| Age | | | | | | |
| 18-44 | 15.1 | 13.6 | 16.6 | 33.8 | 28.9 | 38.7 |
| 45-64 | 40.6 | 38.7 | 42.5 | 40.8 | 37.9 | 43.7 |
| 65+ | 59.2 | 56.9 | 61.6 | 39.5 | 36.4 | 42.6 |
| Education | | | | | | |
| Less than HS | 48.2 | 44.4 | 51.9 | 57.0 | 49.3 | 64.7 |
| HS or GED | 32.9 | 30.8 | 35.0 | 44.6 | 38.7 | 50.6 |
| Some College | 25.3 | 23.9 | 26.7 | 38.8 | 33.7 | 43.9 |
| Income | | | | | | |
| <\$15,000 | 39.6 | 36.9 | 42.2 | 51.4 | 47.7 | 55.1 |
| \$15-24,999 | 34.9 | 31.7 | 38.0 | 41.7 | 36.8 | 46.7 |
| \$25-34,999 | 29.3 | 26.0 | 32.5 | 36.6 | 30.7 | 42.5 |
| \$35-49,000 | 30.1 | 27.2 | 33.0 | 32.3 | 27.2 | 37.5 |
| >\$50,000 | 23.4 | 21.6 | 25.1 | 25.5 | 21.9 | 29.1 |

Two risk factors for arthritis are excess body weight and lack of physical activity. In South Carolina in 2005, 64.5% of adults were overweight or obese and 12.6% of adults are considered physically inactive. The prevalence of arthritis increased with increasing BMI and increased among decreasing levels of physical activity. However, it must be remembered in interpretation that the BRFSS measures are cross-sectional in nature and therefore the prevalence of arthritis can only be reported. Cause and effect of the risk factors on the prevalence of arthritis cannot be ascertained.

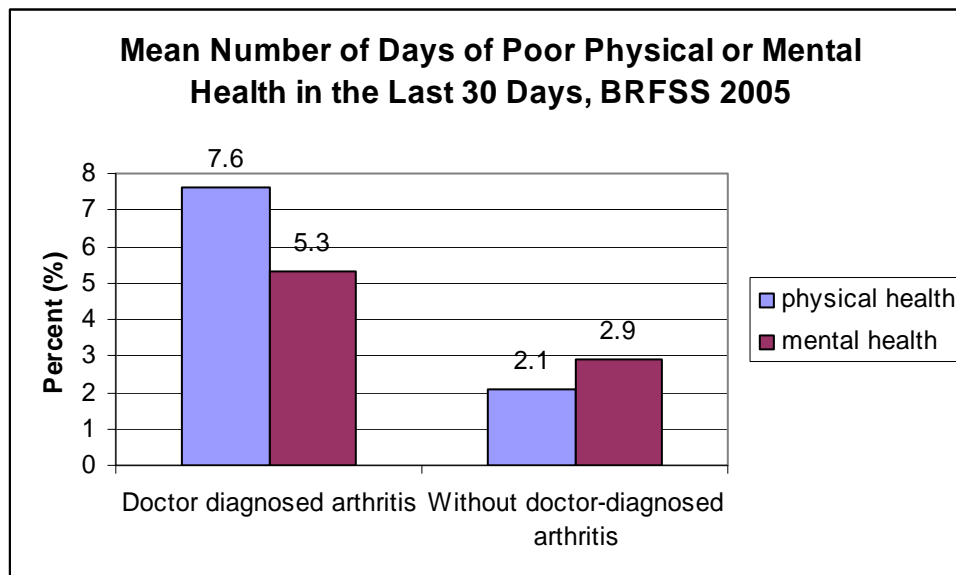
| Variable | Doctor-Diagnosed Arthritis | | | Activity Limitation Attributable to Arthritis Among People with Doctor-Diagnosed Arthritis | | |
|--|----------------------------|----------|----------|--|----------|----------|
| | Mean | Upper CI | Lower CI | Mean | Upper CI | Lower CI |
| Normal BMI | 24.5 | 22.6 | 26.3 | 34.1 | 30.2 | 37.9 |
| Overweight | 30.1 | 28.2 | 32.0 | 34.9 | 31.5 | 38.2 |
| Obese | 39.1 | 36.7 | 41.5 | 44.6 | 41.1 | 48.1 |
| Meets physical recommendations | 24.9 | 23.2 | 26.5 | 31.4 | 28.2 | 34.7 |
| Meets some physical recommendations | 31.1 | 29.3 | 33.0 | 35.7 | 32.6 | 38.9 |
| Physical Inactive | 46.3 | 42.8 | 49.9 | 57.7 | 52.9 | 62.4 |

Those who were considered obese and those who were physically inactive had a significantly higher proportion of both cases of doctor-diagnosed arthritis and activity limitation attributable to arthritis among people with doctor-diagnosed arthritis than the other physical activity and BMI classes.

Approximately 24.8% of adults with doctor-diagnosed arthritis and who were overweight reported that they had been advised by a doctor to lose weight to help with their joint symptoms. Of those who had doctor-diagnosed arthritis and who were obese, approximately 64.5% had been advised by their doctor to lose weight for their arthritis or joint symptoms.

Among adults with doctor-diagnosed arthritis, 55.0% reported that they had been advised to use physical activity to help with their joint symptoms. Ten point seven percent of those with doctor-diagnosed arthritis had attended a class to help with their arthritis symptoms.

Approximately 34.2% of adults with doctor-diagnosed arthritis reported that their health was fair or poor compared to 9.4% of those who did not have doctor-diagnosed arthritis. The mean number of days of both poor physical and poor mental health in the last 30 days was higher among adults with doctor-diagnosed arthritis when compared to those without doctor-diagnosed arthritis.



Of those adults in the State of South Carolina who had doctor-diagnosed arthritis, 25.7% reported they could everything they wanted to do; 39.8% reported they could do most of what they wanted to do; 23.5% reported they could do some of what they wanted to do, and 11.0% reported they could hardly do anything of what they wanted to do.